

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000015700

Entity Name: BARTRAM SPRINGS, LLC

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

414 OLD HARD ROAD
SUITE 201
ORANGE PARK, FL 32003

Current Mailing Address:

414 OLD HARD ROAD
SUITE 201
ORANGE PARK, FL 32003

New Principal Place of Business:

414 OLD HARD ROAD
SUITE 201
FLEMING ISLAND, FL 32003

New Mailing Address:

414 OLD HARD ROAD
SUITE 201
FLEMING ISLAND, FL 32003

FEI Number: 20-2333381

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOOD, JAMES R
414 OLD HARD ROAD
SUITE 201
ORANGE PARK, FL 32003 US

Name and Address of New Registered Agent:

WOOD, JAMES R
414 OLD HARD ROAD
SUITE 201
FLEMING ISLAND, FL 32003 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

04/28/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: THE WOOD DEVELOPMENT CO OF JACKSONVILLE
Address: 414 OLD HARD ROAD, SUITE 201
City-St-Zip: ORANGE PARK, FL 32003

Title: PRES () Delete
Name: WOOD, JAMES R PRES
Address: 414 OLD HARD ROAD, SUITE 201
City-St-Zip: ORANGE PARK, FL 32003

Title: VP/S () Delete
Name: WOOD, SUSAN D VP
Address: 414 OLD HARD RD, SUITE 201
City-St-Zip: ORANGE PARK, FL 32003

Title: T () Delete
Name: EDWARDS, JR., MABRY CFO
Address: 414 OLD HARD RD, SUITE 201
City-St-Zip: ORANGE PARK, FL 32003

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: THE WOOD DEVELOPMENT CO OF JACKSONVILLE
Address: 414 OLD HARD ROAD, SUITE 201
City-St-Zip: FLEMING ISLAND, FL 32003

Title: PRES (X) Change () Addition
Name: WOOD, JAMES R PRES
Address: 414 OLD HARD ROAD, SUITE 201
City-St-Zip: FLEMING ISLAND, FL 32003

Title: VP/S (X) Change () Addition
Name: WOOD, SUSAN D VP
Address: 414 OLD HARD RD, SUITE 201
City-St-Zip: FLEMING ISLAND, FL 32003

Title: T (X) Change () Addition
Name: EDWARDS, JR., MABRY CFO
Address: 414 OLD HARD RD, SUITE 201
City-St-Zip: FLEMING ISLAND, FL 32003

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SUSAN D WOOD

VP

04/28/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date